

INCIDENT FOOD INVENTORY CHECK LIST (7500)

(Revised 1996)

Date:	Incident Name & Number:	Location:
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Ordered/Inventoried By: - - -	Retrograde Team: - - -
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Quantity	Item	Cost	Perishable Foods	<u>Case Lots</u> Broken Unopened	Disposition
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[illegible]

FORMS AND/OR FORMS SAMPLES: RETURN TO ISSUANCE HOME PAGE FOR FORMS/FORMS SAMPLES SITE LINK.

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